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PTO/SB/31 (04-05)

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| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) 3782-0124P |
| In re Application of Petter ERICSON et al. | | |
| Application Number 09/813,112-Conf. #8117 | | Filed March 21, 2001 |
| For PROCESSING OF DOCUMENTS | | |
| Art Unit 2176 | Examiner W. D. Hutton | |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | |
| The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) | | \$ 500.00 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____ | | |
| <input checked="" type="checkbox"/> The \$500.00 fee was previously paid on March 9, 2005. | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 02-2448. I have enclosed a duplicate copy of this sheet. | | |
| <input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | |
| I am the | | |
| <input type="checkbox"/> applicant /inventor. | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | |
| <input type="checkbox"/> attorney or agent of record. Registration number _____ (703) 205-8000 | | |
| <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. 29,680 Telephone number (703) 205-8000 April 4, 2006 Date | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. | | |
| <input type="checkbox"/> *Total of 1 forms are submitted. | | |

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